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ART UNIT	PAPER NUMBER
3626	

NOTIFICATION DATE	DELIVERY MODE
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

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	Application No.	Applicant(s)
	10/578,271	MATSUNAGA, ATSUSHI
Office Action Summary	Examiner	Art Unit	
	RACHEL PORTER	3626	

-- *The MAILING DATE of this communication appears on the cover sheet with the correspondence address* --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE *3* MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.
- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
  Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) ☒ Responsive to communication(s) filed on *11 March 2011*.

2a) ☒ This action is **FINAL**.   2b) ☐ This action is non-final.

3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) ☒ Claim(s) *1,4 and 7-50* is/are pending in the application.

    4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5) ☐ Claim(s) _____ is/are allowed.

6) ☒ Claim(s) *1,4,7-50* is/are rejected.

7) ☐ Claim(s) _____ is/are objected to.

8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) ☐ The specification is objected to by the Examiner.

10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.

    Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

    Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

    a) ☐ All   b) ☐ Some * c) ☐ None of:

      1. ☐ Certified copies of the priority documents have been received.

      2. ☐ Certified copies of the priority documents have been received in Application No. _____.

      3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

    * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☒ Information Disclosure Statement(s) (PTO/SB/08)
    Paper No(s)/Mail Date *11/24/10*.

4) ☐ Interview Summary (PTO-413)
    Paper No(s)/Mail Date. _____ .
5) ☐ Notice of Informal Patent Application
6) ☐ Other: _____ .

DETAILED ACTION

1.   This communication is in response to the amendment filed 3/11/11. Claims

1,4,7-50 are pending.

Information Disclosure Statement

2.   The IDS filed 11/24/10 has been entered and considered by the Examiner.

Claim Rejections - 35 USC § 112

3.   The following is a quotation of the second paragraph of 35 U.S.C. 112:

> The specification shall conclude with one or more claims particularly pointing out and distinctly
> claiming the subject matter which the applicant regards as his invention.

4.   Claims 7, 9, 13,17, 19, 22 and 25-31 are rejected under 35 U.S.C. 112, second

paragraph, as being indefinite for failing to particularly point out and distinctly claim the

subject matter which applicant regards as the invention.

5.   Claims 7, 9, 13, 17, 19, 22 recite the limitation "said control server,". There is

insufficient antecedent basis for this limitation in the claim. There is no control server

recited in claim 1.

[claims 25-31]

        Regarding claims 25-31, it is not clear which statutory class of invention the

applicant intends to claim. Exemplary claim 25 recites "[a]n electronic medical

information program for causing... a computer to function as: an input means for

inputting...; an accumulation means for accumulating....." The Examiner understands

this claim to be distinct from a system claim which recites "a system comprising: input

means for inputting...; accumulation means for accumulating..." (i.e. not a system claim

invoking means-plus-function).

The present claim does not recite a program "comprising" or "including" input

means, accumulation means, etc. The current claim language recites a program for

causing a computer to function in a particular manner. The Examiner construes claims

25-31 as being drawn to program/ software, *per se.*

On page 26 of the 3/11/11 response, Applicant asserts that the claim element

"the electronic information program for... causing a computer to function as " is a means

(or step) plus function limitation that invokes 35 U.S.C. 112, sixth paragraph. However,

it is unclear whether the claim element is a means (or step) plus function limitation that

invokes 35 U.S.C. 112, sixth paragraph, because the claim describes *a computer*

(sufficient structure) functioning as means+function.   If applicant wishes to have the

claim limitation treated under 35 U.S.C. 112, sixth paragraph, applicant is required to:

(a) Amend the claim to include the phrase "means for" or "step for" in accordance

with these guidelines: the phrase "means for" or "step for" must be modified by

functional language and the phrase must **not** be modified by sufficient structure,

material, or acts for performing the claimed function; or

(b) Show that the claim limitation is written as a function to be performed and the

claim does **not** recite sufficient structure, material, or acts for performing the claimed

function which would preclude application of 35 U.S.C. 112, sixth paragraph. For more

information, see MPEP § 2181.

Claim Rejections - 35 USC § 101

6.   35 U.S.C. 101 reads as follows:

> Whoever invents or discovers any new and useful process, machine, manufacture, or composition of
> matter, or any new and useful improvement thereof, may obtain a patent therefor, subject to the
> conditions and requirements of this title.

Claims 25-31 are rejected under 35 U.S.C. 101 because the claimed invention is

directed to non-statutory subject matter.

[claims 25-31]

In the present case, the current language of claim 25 recites "an electronic

information program," or software, *per se*. Software does not fall into one of the four

statutory classes for which a patent is granted. As drafted, the claim fails to define any

structural and functional interrelationships between the code and other elements of a

computer that permit the computer program's function to be realized.

In light of the above, it is respectfully submitted that the claimed invention fails to

recite to satisfy the requirements of 35 U.S.C. 101.

Claims 26-31 contain similar deficiencies and fail to correct the deficiencies of

claim 25, and are therefore also rejected.

Claim Rejections - 35 USC § 102

7.   The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that

form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

8.   Claims 32 is rejected under 35 U.S.C. 102(b) as being anticipated by Iliff (US

5935060A—referred to hereinafter as simply Iliff)

[claim 32]   Iliff discloses a non-transitory computer readable recording media for

storing an electronic medical information program that, when executing on a computer,

causes the computer to perform the steps of (col. 4, lines 45-50):

- inputting patient's chief complaint information into a chief complaint information

  file; (Figures 1a,b, 2; col. 4, lines 14-50)

- inputting doctor's consultation information into a consultation information file;

  (Figures 1a,b, 2; col. 4, lines 14-50)

- accumulating the chief complaint information input into the chief complaint

  information file and the consultation information input into the consultation

  information file; (Figure 3; col. 6, lines 11-18—system databases; col. 8, lines 20-

  43: *the system can slow down to identify the patient and determine the Chief*

  Complaint(s). Then the system invokes the Script Routing subsystem, whose job

  is to determine the patient's general problem area; The patient responses are

  also captured by the script engine, formatted for the script, and used to select the

  next question from the script. This interplay of the script and its script engine may

  consider the patient's medical record, the information provided so far during this

  session, and even some meta functions to determine the next question.

- scoring, with respect to each date of consultation, the input latest chief complaint information and consultation information, and the accumulated past chief complaint information and consultation information, respectively; (col. 9, lines 1-13: each script of a set of time-based scripts may have somewhat different symptoms and weights, so that the author sets up time-based symptoms with extra weights for those diseases whose time-pattern matches the patient's. These weights are automatically added by the script engine as it runs. Each algorithm author must compose, assign, or calculate the questions and the appropriate values at (for instance) each hour as the disease progresses; See also col. 21, lines 26-60)

- automatically generating, based on said scoring, a list by which a temporal variation of the chief complaint information and consultation information can be viewed. (col. 22, lines 10-35)

Claim Rejections - 35 USC § 103

9.   The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

10.   Claims 1,8-31,33-34, 37-50 are rejected under 35 U.S.C. 103(a) as being

unpatentable over Iliff in view (US 5935060A—referred to hereinafter as simply Iliff) in

view of Iliff '093 (US 6569093B2)

[claims 1,33]   Iliff discloses an electronic medical information system using a

computer to manage electronic medical information, said electronic medical information

system being equipped with a control server (Figures 1a,b) comprising:

- an input means for inputting, patient's chief complaint information into a chief

  complaint information file and for inputting doctor's consultation information

  associated with said patient's chief complaint information into a consultation

  information file; (Figures 1a,b, 2; col. 4, lines 14-50)

- an accumulation means for accumulating said chief complaint information and

  said consultation information; (Figure 3; col. 6, lines 11-18—system databases;

  col. 8, lines 20-43: *the system can slow down to identify the patient and*

  determine the Chief Complaint(s). Then the system invokes the Script Routing

  subsystem, whose job is to determine the patient's general problem area; The

  patient responses are also captured by the script engine, formatted for the script,

  and used to select the next question from the script. This interplay of the script

  and its script engine may consider the patient's medical record, the information

  provided so far during this session, and even some meta functions to determine

  the next question.

- a calculation means for scoring, with respect to each date of consultation, the

  latest chief complaint information and consultation information input by said input

  means, and the past chief complaint information and consultation information

  accumulated by said accumulation means, respectively; (col. 9, lines 1-13: each

  script of a set of time-based scripts may have somewhat different symptoms and

weights, so that the author sets up time-based symptoms with extra weights for those diseases whose time-pattern matches the patient's. These weights are automatically added by the script engine as it runs. Each algorithm author must compose, assign, or calculate the questions and the appropriate values at (for instance) each hour as the disease progresses; See also col. 21, lines 26-60) and

- a generation means for automatically generating, based on said scores, a list by which a temporal variation of said chief complaint information and consultation information can be viewed. (col. 22, lines 10-35) and wherein said list generation means is configured to present said scores calculated by said calculation means in time series for respective symptoms of the chief complaint information and consultation information (col. 22, lines 10-35)

- a display means for displaying said list (Figure 1a,b; col. 4, lines 14-22)

- wherein said display means further displays a table in which a plurality of symptoms and degrees of respective symptoms are selectably listed, (col. 9, lines 21-30; 41-48) and

- the input means of said chief complaint information and consultation information automatically inputs one or more relevant symptoms and degrees of symptoms, in response to the user operation of selecting them from the table, into said chief complaint information file and the consultation information file, (col. 9, lines 19-35) and

- wherein said calculation means is configured to automatically calculate by
  aggregating relevant scores corresponding to the degree of the selected
  symptom, with each of said degrees of symptoms having a pre-defined score
  assigned thereto. (col. 13, lines 10-27; col. 21, lines 26-60)

Iliff discloses the electronic medical information system according to claim 1, as
explained in the rejection of claim 1, but does not expressly disclose a graphing feature.

Iliff'093 discloses a system wherein said list generation means is configured to
automatically generate a graph by which temporal variation of the scores calculated by
said calculation means can be viewed. (col. 25, lines 55-col. 26, line 25; col. 26, line
35-col. 28, line 32) At the time of the Applicant's invention, it would have been obvious
to one of ordinary skill in the art to modify the system of Iliff with the teaching of Iliff'093
to generate graphs of temporal variation of symptoms. As suggested by Iliff'093, one
would have been motivated to include this feature because the way in which a
symptom varies over time has great diagnostic significance and various aspects of a
symptom time series aid in the general ability to provide or refine a diagnosis. (col. 25,
lines 55-65)

[claim 8, 37] Iliff discloses the electronic medical information system according to claim
1, wherein said generation means generates a list so that, when the patient is receiving
consultation for a plurality of different diseases around the same period, the respective

diseases can be viewed on a same screen in a distinguishable manner. (Figure 14-15;

col. 27, lines 1-26; col. 28, lines 6-32)

[claim 9, 38] Iliff discloses the electronic medical information system according to claim

1, wherein said: an input means inputs electronic chart information composed of one or

more of information as to disease name, chief complaint reported at the consultation,

history of present illness, anamnesis, anamneses of family members, observations of

the doctor, inspection, treatment, dosage, injection/instillation, next-reservation (figures

1-2; col. 5, lines 13-20);

wherein said generation means generates an electronic chart based on the input

information (col. 5, lines 51-67);

wherein a control server (see 112, 2nd paragraph) further comprises:

a storage means for storing the generated electronic chart into an electronic

chart file (col. 6, lines 1-18) ; a reading means for setting and displaying, on said list, a

link button associated with the electronic chart and reading the electronic chart from

said electronic chart file when the link button is pressed (col. 4, lines 40-50); and

wherein a display means displays the electronic chart which has been read by

said reading means. (col. 5, lines 21-25)

[claim 10, 39] Iliff discloses the electronic medical information system according to

claim 1, wherein the input means inputs handwritten information either in an imaged or

coded manner. (col. 4, lines 14-22-- input means and image capture include camera to gather information about the patient's symptoms).

[claims 11, 40]   Iliff discloses he electronic medical information system according to claim 1, wherein the input means for inputting said electronic chart information comprises: an audio input means, for inputting audio information; and an image input means (such as a camera) for inputting image information, and wherein said (electronic chart) generation means generates an electronic chart so that the audio information and image information can be reproduced from the electronic chart as a part of the electronic chart.(col. 4, lines 14-22—input means and image capture include camera to gather information about the patient's symptoms; col. 4, lines 24-39—system also includes with voice recognition components)

 [claim 12, 34]   Iliff discloses the electronic medical information system according to claim 1, wherein if the patient did not appear on the day reserved in a next-reservation information which has been input by said input means, said list generation means generates the list after clearing the field for the day with blank entries for complaints when patient did not show.(col. 22, lines 24-34- the process 490 could schedule a re-enter session to allow a length of time to pass and see if a diagnosis could be reached at a later time. At state 524, process 490 requests the patient to have tests performed and to consult the system again. These tests may include self-exam maneuvers, imaging modality tests (258, FIG. 2) or laboratory tests (260, FIG. 2). At

state 526, process 490 forwards any urgent results to a health care provider for

immediate action.)

[claim 13, 41] Iliff discloses the electronic medical information system according to claim

1, wherein (a) control server (see 112,2nd rejection) comprises: a reading means for

reading, from an electronic chart file, one or more of information as to inspection,

treatment, dosage, and injection/instillation (col. 5, lines 21-25; col. 6, lines 1-18;

Figures 1 a, b);

        wherein said accumulation means accumulates the information which has been

read out by said reading means, (col. 6, lines 11-18) and wherein said list includes a link

button for each information on the list, said reading means reads corresponding

information accumulated by said accumulation means when any of the link buttons is

pressed, and the display means display the information which has been read out to be

viewable. (col. 8, lines 63-col. 9, lines 16)

[claim 14, 42]   Iliff discloses the electronic medical information system according

to claim 1, wherein said control server comprises:

        a storing means for storing, into a conventional chart file, a conventional chart

converted into an electronic document format which precisely reproduces an original

image (col. 6, lines 1-18); a reading means for reading, upon request for viewing the

conventional chart file, a conventional chart requested for viewing from said

conventional chart file (col. 4, lines 40-50); and wherein the display means displays the

conventional chart which has been read out by reading means. (col. 5, lines 21-25)

 [claim 15, 43]   Iliff discloses the electronic medical information system

        wherein, a reading means further reads reading, from an electronic chart file, one

or more of information as to inspection, treatment, dosage, and injection/instillation (col.

5, lines 21-25; col. 6, lines 1-18; Figures 1 a, b);

        wherein of the information recorded/stored in said conventional chart file, the

information corresponding to said electronic chart information is accumulated by the

accumulation means (col. 6, lines 11-18) and

        said (list) generation means generates a list including the temporal variation of

each information of the accumulated conventional chart file accumulated by the

accumulation means inn time series so that it can be compared (in comparison) with

the temporal variation of said graph. (col. 8, lines 63-col. 9, lines 16)

[claim 16, 44] Iliff discloses the electronic medical information system according to

claim 1, wherein said input means of chief complaint information is implemented by

transmitting data, to the control server, from a communication terminal used by the

doctor for consultation via a LAN or a WAN, or from the patient's communication

terminal via a communication network. (col. 3, lines 66-col. 4, line 50)

[claim 17,45] Iliff discloses the electronic medical information system according to claim 1, wherein said input means of consultation information is implemented by transmitting data from said consultation terminal to said control server. (col. 2, lines 24-42; col. 3, lines 66-col. 4, line 50)

[claim 18,46]   Iliff discloses the electronic medical information system according to claim 1, wherein said patient's communication terminal transmits, via a communication network, vital information including one or more of the patient's weight, blood pressure, frequency of meals, content of meals, taking exercise or not, and sleeping hours to said control server, (col. 4, lines 1-39; col. 10, line 59-col. 11, line 5) wherein said input means receive the transmitted vital information and inputting it into a vital information file, (col. 4, lines 1-39) and said generation means generates said list by arranging the vital information in time series so that it can be compared with the temporal variation of said graph. (col. 8, lines 55-col. 9, line 15)

[claim 19, 47]   Iliff discloses the electronic medical information system according to claim 1, wherein said input means is implemented by transmitting data from a consultation terminal to said control server via a LAN or a WAN. (col. 4, lines 1-50)

[claim 20]   Iliff discloses the electronic medical information system according to claim 1, wherein said consultation terminal comprises an input means for inputting handwritten information in an imaged or coded form. (col. 4, 14-22—camera for inputting image information)

 [claim 21] Iliff discloses the electronic medical information system according to claim 1, wherein said consultation terminal comprises said audio input means and said image

input means. .(col. 4, lines 14-22—input means and image capture include camera to

gather information about the patient's symptoms; col. 4, lines 24-39—system also

includes with voice recognition components)

[claim 22, 48]   Iliff discloses the electronic medical information system according

to claim 1, wherein, upon receiving a request, via a communication network such as a

LAN, a WAN, or the Internet, for viewing said list or the information accumulated by said

accumulation means from said consultation terminal, said patient's communication

terminal, and a communication terminal of a viewer, said control server is configured to

display the list or said each information to be viewable, within an authorized range, from

the consultation terminal, the patient's communication terminal, and the viewer's

communication terminal, respectively. (col. 4, lines 1-50;col. 5, lines 13-50)

[claim 23, 49]   Iliff discloses the electronic medical information system according

to claim 1, wherein said control server is configured such that, by letting an IC card

reader/writer connected to a communication terminal read the IC card carried by a

person permitted to use the communication terminal being one or more of said

consultation terminal, said patient's communication terminal, and the viewer's

communication terminal, said control server receives a signal requesting authorization

via a communication network, or the Internet and performs said authorization. (col. 5,

lines 51-col. 6, line 18—restricted authorized access for users; also col. 5, lines 13-18 –

network interface cards for communication)

[claim 24, 50] Iliff discloses the electronic medical information system according to claim 1, wherein said control server is configured such that, by letting the reader/writer connected to the communication terminal of a viewer read said IC card carried by the patient and the IC card carried by the ambulance crew, the paramedic, or the doctor on duty, in case of emergency, the control server receives and authorizes a signal requesting authorization via a communication network, and displays at least said information of history of present illness and anamnesis so that they can be viewed with the viewer's communication terminal. col. 5, lines 51-col. 6, line 18—restricted authorized access for users; also col. 5, lines 13-18 –network interface cards for communication)

[claim 25] Iliff discloses an electronic medical information program for causing, for the purpose of introducing electronic medical information, a computer to function as: an input means for inputting said patient's chief complaint information into its chief complaint information file and for inputting said doctor's consultation information into its consultation information file; an accumulation means for accumulating the chief complaint information input into the chief complaint information file and the consultation information input into the consultation information file; a calculation means for scoring, with respect to each date of consultation, the input latest chief complaint information and consultation information, and the accumulated past chief complaint information and consultation information, respectively; a generation means for automatically generating, based on the calculated scores, a list by which the temporal variation of the chief

complaint information and consultation information can be viewed. (See col. 4, line 1-
50, and the citations provided in the rejection of claim 1)

[claim 26]   Iliff discloses the electronic medical information program according to

claim 25 for causing, for the purpose of introducing electronic medical information, a

computer to function as a display means for displaying said list. (col. 4, lines 14-22)

[claim 27]   Iliff discloses the electronic medical information program according to

claim 25 for causing, for the purpose of introducing electronic medical information, a

computer to function as: an input means for inputting said electronic medical information

(col. 6, lines 1-18); a generation means for generating an electronic chart from the input

electronic chart information; a storing means for storing the generated electronic chart in

an electronic chart file; a reading means for setting/displaying link buttons associated

with the electronic chart file on said list and reading, upon pressing of any of the link

buttons, the electronic chart from said electronic chart file; (col. 4, lines 40-50); and a

display means for displaying the electronic chart which has been read out by said

reading means.   .(col. 5, lines 21-25)

[claim 28]   Iliff discloses the electronic medical information program according to

claim 25 for causing, for the purpose of introducing electronic medical information, a

computer to function as: a reading means for reading, from an electronic chart file, one

or more of information as to inspection, treatment, dosage, and injection/instillation;

(figures 1-2; col. 5, lines 13-20) an accumulation means for accumulating the

information which has been read out; said list generation means for arranging the

temporal variation of each of the accumulated information in time series so that it can be

compared with the temporal variation of said graph; a reading means for

setting/displaying a link button for each information on the list and reading the

corresponding information accumulated by said accumulation means upon pressing of

any of the link buttons; and a display means for displaying the information which has

been read out by said reading means. (See figures 1-2; col. 5, lines 13-25; col. 5, lines

51-67; col. 6, lines 1-18)

[claim 29]   Iliff discloses the electronic medical information program according to

claim 25 for causing, for the purpose of introducing electronic medical information, a

computer to function as: a storage means for storing, into a conventional chart file, said

conventional chart converted into an electronic document format which precisely

reproduces an original image (col. 6, lines 1-18); a reading means for reading, upon

request for viewing the conventional chart file, a conventional chart requested for

viewing from said conventional chart file (col. 4, lines 40-50); and a display means for

displaying the conventional chart which has been read out to be viewable. (col. 5, lines

21-25)

[claim 30]   Iliff discloses the electronic medical information program according to any

claim 28 for causing, for the purpose of introducing electronic medical information, a

computer to function as: an accumulation means for accumulating, using the

accumulation means the information corresponding to said electronic chart of the

information recorded in said conventional chart file col. 6, lines 11-18); and a generation

means for generating said list by arranging the temporal variation of each information of

the accumulated conventional chart in time series so that it can be compared with the

temporal variation of said graph. (col. 8, lines 63-col. 9, lines 16)

[claim 31]   Iliff discloses the electronic medical information program according to

claim 25 for causing, for the purpose of introducing electronic medical information, a

computer to function as: an input means for receiving, upon transmission of vital

information including at least one or more of information of the patient's weight, blood

pressure, frequency of meals, content of meals, taking exercise or not, sleeping hours,

from said patient's communication terminal to the computer via a communication

network such as the Internet, (col. 4, lines 1-39; col. 10, line 59-col. 11, line 5) the

transmitted vital information and inputting it into a vital information file (col. 4, lines 1-

39); and a generation means for generating said list by arranging the vital information in

time series so that it can be compared with the temporal variation of said graph. (col. 8,

lines 55-col. 9, line 15)

11.   Claims 4, 7 and 35-36 are rejected under 35 U.S.C. 103(a) as being

unpatentable over Iliff (US 5935060A—referred to hereinafter as simply Iliff) in view of

Iliff'093, and in further view of Chikovani et al (US 6383135B1)

[claim 4, 35] Iliff and Iliff '093 teach the electronic medical information system according

to claim 1 wherein including display means displaying a table (Figures 1a, e.g. display a

table (col. 9, lines 41-48)), but does not expressly disclose displaying an image

simulating a human body with check buttons to describe symptoms.

Chikovani discloses a triage system configured to an image simulating a human

body with check buttons on major regions thereof, and when any one of said symptoms

is selected, the check button corresponding to the region which is developing the

selected symptom is automatically checked. (Figures 3-4; col. 4, lines 32-53). At the

time of the applicant's invention, it would have been obvious to one of ordinary skill in

the art to modify the system of Iliff and Iliff'093 with the teaching of Chikovani to provide

an image of the body that allows users to select an area where symptom is located. As

suggested by Chikovani, one would have been motivated to include this feature to allow

the patient to more accurately visualize and identify the specific region where the

symptoms are. (col. 2, lines 16-19)

[claim 7, 36] Iliff and Iliff '093 teach the electronic medical information system according

to claim 1, further comprising a display means (Figures 1a, e.g. display a table (col. 9,

lines 41-48)), but does not expressly disclose displaying an image simulating a human

body with check buttons to describe symptoms.

Chikovani discloses a triage system including a display means when symptoms

of the chief complaint information and consultation information are input by said input

means, link buttons at the region where the respective symptoms are developing on the

image simulating the human body; (a control means further comprising—see 112, 2nd

paragraph rejection) a reading means for reading, from the chief complaint information

or consultation information accumulated in said accumulation means, each information

of the region displaying the link button when the displayed link button is pressed; and a

wherein said display means for displaying each information which has been read by

said reading means. (Figures 3-4; col. 3, lines 44-50; col. 4, lines 32-53; col. 5, lines 6-

17). At the time of the applicant's invention, it would have been obvious to one of

ordinary skill in the art to modify the system of Iliff and Iliff'093 in combination. with the

teaching of Chikovani to provide an image of the body that allows users to select an

area where symptom is located. As suggested by Chikovani, one would have been

motivated to include this feature to allow the patient to more accurately visualize and

identify the specific region where the symptoms are. (col. 2, lines 16-19)

Response to Arguments

12.   Applicant's arguments filed 3/11/11 have been fully considered but they are not

persuasive.

(A)   Applicant argues that claims 25-31 are statutory because of the "mean+function"

language of claim 25.

        In response, the claim as currently drafted does not properly invoke 112, sixth

paragraph. Applicant does not claim an article of manufacture comprising: means for

inputting, means for calculating…. The current claim language recites a program for

causing a computer to function in a particular manner. Moreover, in using

mean+function language, sufficient structure in describing the system components must

not be used. The current claim language recites a computer.

The rejections under 35 USC 101 and 112, 2nd paragraph have been maintained,

and, the Examiner construes claims 25-31 as being drawn to program/ software, *per se.*

(B) Applicant argues features of the new and newly amended claim language. The

examiner has provided new grounds of rejection the address the newly added features.

Conclusion

13.   Applicant's amendment necessitated the new ground(s) of rejection presented in

this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP

§ 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37

CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE

MONTHS from the mailing date of this action. In the event a first reply is filed within

TWO MONTHS of the mailing date of this final action and the advisory action is not

mailed until after the end of the THREE-MONTH shortened statutory period, then the

shortened statutory period will expire on the date the advisory action is mailed, and any

extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of

the advisory action. In no event, however, will the statutory period for reply expire later

than SIX MONTHS from the date of this final action.

Any inquiry concerning this communication or earlier communications from the

examiner should be directed to RACHEL PORTER whose telephone number is

(571)272-6775. The examiner can normally be reached on M-F, 10-6:30.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's

supervisor, Robert Morgan can be reached on (571) 272-6773. The fax phone number

for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the

Patent Application Information Retrieval (PAIR) system. Status information for

published applications may be obtained from either Private PAIR or Public PAIR.

Status information for unpublished applications is available through Private PAIR only.

For more information about the PAIR system, see http://pair-direct.uspto.gov. Should

you have questions on access to the Private PAIR system, contact the Electronic

Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a

USPTO Customer Service Representative or access to the automated information

system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Robert Morgan/
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Unit 3626

/R. P./
Examiner, Art Unit 3626